

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	
Title ::	PUTTING STROKE ANALYZER AND PUTTER FOR USE THEREIN
Attorney Docket Number::	KITAMU0003
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	9
Small Entity?::	YES
Latin Name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity

Given Name:: Toru
Middle Name::
Family Name:: YAMADA
Name Suffix::
City of Residence:: Yamagata-shi
State or Province of Residence:: Yamagata
Country of Residence:: JAPAN
Street of mailing address:: 13-16, Naneichou 2-chome
City of mailing address:: Yamagata-shi
State or Province of mailing address:: Yamagata
Country of mailing address:: JAPAN
Postal or Zip Code of mailing address:: 990-2445

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity

Given Name:: Daiichiro
Middle Name::
Family Name:: SUZUKI
Name Suffix::
City of Residence:: Hamamatsu-shi
State or Province of Residence:: Shizuoka
Country of Residence:: JAPAN
Street of mailing address:: Ko-to-Ra-Se-nu 306, 800-2, Watase-cho
City of mailing address:: Hamamatsu-shi

State or Province of mailing address:: Shizuoka
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 435-0036

Correspondence Information

Correspondence Customer Number :: 24203

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone Number:: (703) 979-5700
Fax Number:: (703) 979-7429
E-Mail address:: GANDS@szipl.com

Representative Information

Representative Customer Number::	24203	
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2003/016450	12/22/03

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::